Research Currents

VA creates new Parkinson's disease centers

A has created six new centers specializing in research, education and clinical care for Parkinson's disease and committed \$30 million to fund the centers over the next four years.

Parkinson's Disease Research, Education and Clinical Centers (PADRECCs) will be established this year at VA medical centers in Houston, Philadelphia, Portland, Richmond, San Francisco and West Los Angeles.

Operating as a national consortium, the new centers will function similarly to VA's Geriatric Research, Education and Clinical Centers (GRECCs) and Mental Illness Research, Education and Clinical Centers (MIRECCs).

Each Parkinson's Center will conduct studies covering biomedicine, clinical trials, rehabilitation, and health services. Each center will also participate in a major VA cooperative study to assess the effectiveness of two surgical approaches for stimulating regions of the brain involved in Parkinson's.

Parkinson's disease, affecting some 1.5 million Americans, is a slowly progressive disorder caused by degeneration of cells in a region of the midbrain that produces the neurotransmitter *dopamine*. Symptoms include tremors on one side of the body, slowness of movement, stiffness of limbs, and gait or balance problems.

Update from the Cooperative Studies Program...

Tri-national studies to test therapies for HIV, stroke

By John R. Feussner, MD, MPH, Chief R&D Officer and CSP Director and Joseph Gough, MA, CSP Program Manager

In 1999, VA's Cooperative Studies
Program (CSP) announced a collaboration between VA and the national
health-research agencies for the United
Kingdom and Canada: the UK Medical
Research Council and the Canadian
Institutes for Health Research. Together, the three agencies issued a Joint
Tri-National Clinical Trials Program
Announcement to solicit applications
for phase-III clinical effectiveness
trials to be conducted in partnership.

The first trial in planning through the Tri-National partnership, "Optimal Management of Patients with HIV Infection for Whom First- and Second-Line Highly Active Antiretroviral Therapy Has Failed," will be initiated this year by the West Haven CSP Coordinating Center. Co-lead VA investigators will be Sheldon Brown, MD, Bronx, N.Y.; and Mark Holodniy, MD, Palo Alto. Martin Schechter, MD, University of British Columbia; and Janet Darbyshire, MD, London School of Hygiene and Tropical Medicine, are the Canadian and British lead investigators, respectively. The trial is a multi-drug strategy study designed to

see CSP Update on pg. 2

Up to \$3 million set for patient-safety studies

VA's Health Services Research and Development Service (HSR&D) has earmarked up to \$3 million in funding over the next four years for studies focused on preventing errors and injuries in clinical care. The new solicitation, open to all VA investigators, builds on previous VA initiatives in patient safety.

The new program announcement will "especially encourage exploration of relatively new areas and new approaches" while it supports further research on common types of medical errors, such as adverse drug events and hospital-acquired infections, said Claire Maklan, MPH, PhD, Chief of Scientific Development for HSR&D.

Dr. Maklan said VA investigators are in a unique position to play a leadership role in patient-safety research.

"VHA's extensive computerized databases, comprehensive range of health care settings, management practices and financing mechanisms facilitate types of patient safety research that may not be possible in other arenas," said Dr. Maklan.

Letters of intent are due the last day of each month. The initial proposal receipt date is May 1, 2001. For full details contact Claire Maklan at claire.maklan@hq.med.va.gov or (202) 273-8287; or check the R&D website at www.va.gov/resdev/fr/frrfp/prevention_errors.doc.

\$1.6 million NIH grant to expand FES program

A \$1.6 million five-year grant from the National Institute of Neurological Disorders and Stroke will enable researchers at the Cleveland Functional Electrical Stimulation (FES) Center to explore the mechanism behind Deep Brain Stimulation (DBS), a therapy used to treat Parkinson's disease and other movement disorders. The technique uses small electrical shocks to temporarily subdue parts of the brain—usually the thalamus or globus pallidus—involved in Parkinsonian tremors.

Researchers at the Cleveland FES Center—a joint project of the Louis Stokes Cleveland VA Medical Center, Case Western Reserve University and MetroHealth Medical Center—will work with colleagues at the Cleveland Clinic to develop computer models to pinpoint the effects of DBS.

"We plan to determine exactly which elements of the brain are being activated during DBS and then we'll develop new technologies to activate them selectively, turning them on and off at will to achieve the desired clinical result," said lead investigator Warren M. Grill, PhD, a researcher with VA and professor of biomedical engineering at Case Western Reserve University, the recipient of the grant.

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CSP Update (cont. from pg. 1)

compare a "standard" treatment of three or four antiretroviral drugs to a "mega" treatment of five or more drugs in patients who have failed at least two "highly active" antiretroviral regimens. The goal is to prevent new or recurrent AIDS-related health events—such as pneumonia—or death through optimal combinations of drugs. The trial is also designed to assess the relative impact of a three-month interruption in drug treatment versus no interruption.

The three international collaborating agencies have also agreed to plan a second study, "Clopidigrel and Aspirin Versus Aspirin Alone Stroke Study." This trial will compare the combination of aspirin and clopidogrel (a platelet inhibitor) to aspirin alone for the secondary prevention of stroke in patients with a previous stroke or transient ischemic attack. The VA colead investigators are David C. Hess, MD, Augusta, Ga.; and Glenn D. Graham, MD, PhD, Albuquerque. John Norris, MD, University of Toronto, and Vladimir Hachinski, MD, University of Western Ontario; and Charles Warlow, MD, Western General Hospital, Edinburgh, Scotland, are the Canadian and British lead investigators, respectively. If approved for funding, the study will be initiated by the Palo Alto CSPCC in 2002.

Benefits of the Tri-National program include more efficient patient recruitment, increased global application of results, minimization of duplicative research, and increased efficiency for the conduct of large trials.

CSP completed its Second Tri-National Clinical Trials solicitation Feb. 8, 2001. Information on new studies that develop from this solicitation will be announced to the VA Research ACOS and R&D Offices and will be available from Joe Gough at (202) 273-8248.

Notify R&D Communications of your publications

VHA policy requires that research services at VA medical centers notify R&D Communications when findings are accepted for publication or presentation.

Notices may be sent by e-mail to researchinfo@vard.org or by fax to (410) 962-0084.

A revised version of the policy on notification and acknowledgment of VA support is on the R&D website at www.va.gov/resdev/directive/ webinstruct2a.htm.

Funding opportunities

Rehabilitation R&D solicita-

tions—RR&D is accepting proposals to establish new centers in a variety of research areas. Proposals are due by March 6. RR&D, in collaboration with the Eastern Paralyzed Veterans Association, has also announced new funding opportunities in spinal-cord research. Proposals must be received by March 15. For more details on these opportunities visit the RR&D website at www.vard.org/opps/dev.htm or call Laura Bowman at (202) 408-3680.

Cooperative Studies Program solicitations—The Cooperative
Studies Program (CSP) is accepting
Letters of Intent in the following
research areas: Type II Diabetes,
Prostate Cancer, Acute/Chronic Renal
Failure, Aging, Gulf War Illnesses,
PTSD and Tri-National (VA/United
States, United Kingdom and Canada)
clinical trials of treatments for common
chronic diseases. For instructions on
submitting a CSP Planning Request
(Letter of Intent) and more details
contact Joe Gough at (202) 273-8248
or joe.gough@hq.med.va.gov.

What's on the Web for VA investigators?

The main Internet site for VA research, www.va.gov/resdev, contains a wealth of resources for VA investigators. You'll find in-depth descriptions of the four services within R&D, as well as an extensive array of online documents—annual reports, technical reports, newsletters, primers and VA's Journal of Rehabilitation Research. The site also contains important information on funding opportunities, guidelines, upcoming meetings, and research positions within VA.

Of special note:

- VA Research Currents will be available by approximately the 15th of each month under the "What's New" heading at the top of the R&D homepage.
- Abstracts accepted for the HSR&D Annual Meeting, held this year Feb. 14 16, are on the site in a searchable database at www.va.gov/resdev/programs/hsrd/hsrd_ab_01.htm. You can also find HSR&D progress reports for fiscal years 2000 and 1999 on the HSR&D page, under the "Search HSR&D Progress Reports" link.

You may also want to visit **www.vard.org**, a separate site maintained by VA's Rehabilitation Research and Development service. Among the current highlights on the site are the proceedings from the October 2000 White House conference on "Technologies for Successful Aging."

Hotline Call schedule

R&D Hotline Conference Calls will be held March 12, May 14, July 9, Sept. 10, and Nov. 19, noon to 12:50 p.m. (EST). The new number to call is: (877) 230-4050.

Gulf War meeting message: More research needed

Gulf War research is the key to understanding the illnesses reported by some Gulf War veterans, scientists said at a meeting marking the tenth anniversary of the government's effort to find causes and potential treatments for the ailments. More than 330 scientists, physicians, veterans' representatives and others gathered Jan. 24-26 in Alexandria, Va., for the "Conference on Illnesses among Gulf War Veterans: A Decade of Scientific Research."

Although medical examinations and studies have shown that the veterans have real illnesses, evidence suggests the veterans do not have a unique syndrome that fits a single diagnosis, said John R. Feussner, MD, MPH, VA's Chief Research and Development Officer, in his keynote address. Dr. Feussner noted that 10 years after the war, Gulf War veterans do not have a higher death rate than normal. He said the veterans do not have unusually high rates of infectious diseases, cancer or hospitalizations, and that their offspring do not have higher rates of birth defects than the general population.

"One of the clinical and research difficulties is there is no conventional diagnosis," Dr. Feussner said. "The symptoms are very broad." Dr. Feussner said about 110,000 of the nearly 700,000 U.S. troops who served in the Gulf War have reported symptoms including fatigue, muscle and joint pain, and memory loss. He said the federal government—VA, the Department of Defense and the Department of Health and Human Services—has thus far devoted \$155 million to 192 research projects seeking causes and testing possible treatments for the symptoms.

Other plenary sessions at the conference focused on longitudinal follow-up studies of Gulf War veterans, research approaches to case definitions, neuropsychological research, and potential exposures during the war. Breakout sessions focused on epidemiology, toxicology, treatment, neurological and neuropsychological factors, psychological and psychosocial factors, and force health protection and surveillance.

The conference was conducted by the Research Working Group of the Military and Veterans Health Coordinating Board. Kelley Brix, MD, MPH, Assistant Chief Research and Development Officer for VA, and Lt. Col. James Riddle, DVM, MPH, Office of the Assistant Secretary of Defense for Health Affairs, co-chaired the event.

Listserve keeps QUERI members informed

QUERInfo, an e-mail newsletter for participants in VA's Quality Enhancement Research Initiative, offers timely news and a forum for communication about data issues pertaining to QUERI projects.

QUERI focuses on translating research findings and innovations into patient care and system improvements in eight disease-specific areas.

One group, for example, has among its goals to reduce hospital readmission rates for veterans with chronic heart failure. Another is working to improve antipsychotic treatment for veterans with schizophrenia.

For more information on the listserve and QUERI in general visit http://vaww.va.gov/resdev/queri.htm.

Newsmakers

Marguerite T. Hays, MD, received the Secretary's Exceptional Service Award for more than three decades of distinguished service to VA as a research administrator, educator and scientist. Dr. Havs served as director of the Medical Research Service and Chief R&D Officer, and held leadership positions at the VA healthcare systems in Buffalo, Palo Alto, Greater Los Angeles and Martinez, Calif. She is credited with establishing peer review as the basis for VA research funding, and initiated special research programs in several areas of high priority for veterans, including schizophrenia, alcoholism and aging.

Lisa V. Rubenstein, MD, MPH, director of the HSR&D Center of Excellence at the VA Greater Los Angeles Healthcare System, received the 2001 Under Secretary's Award for Outstanding Achievement in Health Services Research. Dr. Rubenstein is nationally recognized for her work in designing and evaluating systems to

improve the quality of health care, both within and outside VA. A strong proponent of translating research into practice, Dr. Rubenstein has spearheaded the development of several health-services research methods, including functional status computer feedback, scale-based methods of care and sickness assessment, and structured implicit review.

Leslie Gonzales Rothi, PhD,

director of the Brain Rehabilitation Center at the Gainesville VAMC, was named president-elect of the International Neuropsychological Society (INS). Dr. Rothi will serve as president of the 3,700-member organization for one year, starting in February 2002. The Brain Rehabilitation Center, one of nine Centers of Excellence of VA's Rehabilitation Research and Development Service, focuses on post-acute rehabilitation for veterans with cognitive and motor impairments.

Gerald F. Di Bona, MD, Chief of Medical Service at the Iowa City VAMC, was elected a foreign member of the Royal Society of Arts and Sciences in Gøteborg, Sweden. Dr. Di Bona, with VA since 1978, has conducted research in the areas of nephrology and cardiovascular disease. He received VA's Middleton Award in 1995.

Paul Volberding, MD, was named chief of Medical Service at the San Francisco VAMC. Dr. Volberding, a pioneer in AIDS treatment and clinical research, is principal investigator on the Center for AIDS Research of the Gladstone Institute of Virology and Immunology at the University of California, San Francisco.

Upcoming events

April 12 – 13: Rehabilitation R&D National Meeting, Crystal City, Va. Theme: "Intellectual Property in VA: Changes, Challenges and Collaboration." Info: Bob Potts, (202) 408-3681.

April 15 – 21: National VA Research Week (note revised date). Watch *VA Research Currents* for more details, or call R&D Communications, (410) 962-1800, ext. 223.

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